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FACSIMILE TRANSMITTAL SHEET

TO: Examiner John A. Jeffrey

FIRM/COMPANY: U.S. Patent and Trademark Office /
Mail Stop Amendment

FACSIMILE NUMBER: 703.872.9306

CONFIRMATION TELEPHONE: 703.308.0858 (receptionist) or
703.306.4601 (J.A. Jeffrey)

FROM: Anne Marie Leavy for Edward J. Lynch

DIRECT DIAL: 415.371.2217

DATE: November 18, 2004

USER NUMBER: 5121

FILE NUMBER: Docket No. R0367-01002

TOTAL # OF PAGES: 13
(INCLUDING COVERSHEET)

MESSAGE: Attached is an *Amendment and Response to Office Action Mailed 8/20/2004* for Serial No. 10/684,124, filed October 10, 2003.

Please confirm receipt of this facsimile.

NOTE: Original will NOT follow

CONFIDENTIALITY NOTICE

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If there is a problem with this transmission, please call us as soon as possible at 415.371.2200.

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the application of *Burbank et al.*For: **IMAGEABLE BIOPSY SITE MARKER**

Serial No.: 10/684,124

Filed: October 10, 2003

Atty. Docket No.: R0367-01002

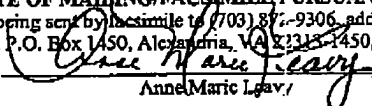
) Examiner: J. A. Jeffrey

) Group Art Unit: 3742

) **TRANSMITTAL**

CERTIFICATE OF MAILING/FACSIMILE PURSUANT TO 37 C.F.R. §1.8

I hereby certify that these papers are being sent by facsimile to (703) 872-9306, addressed to Examiner John A. Jeffrey, at Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on November 18, 2004, in San Francisco, CA.


 Anne Marie Leary

Mail Stop Amendment
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Dear Sir:

1. Transmitted herewith for filing in the above-identified patent application is an Amendment and Response to Office Action Mailed 08/20/2004 and Terminal Disclaimer by Attorney.

2. Claim Fee Calculation

☒ No additional claim fee is required.
☐ Amendment increases number of claims or multiple dependencies.

Additional Claim Fee Calculation

Description	Fee Code	Claims	Extra	Rate	Fee
Independent Claims	2201	4 - 4 =	0 x	\$44=	\$ 0
Total Claims	2202	20 - 20 =	0 x	\$9=	\$ 0

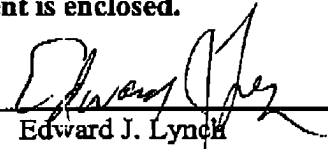
Fees Due \$0-

3. Additional fees: Terminal Disclaimer fee under 37 CFR 1.20(d) \$55

Total Fees Due \$55

4. Payment of Fees

☐ Enclosed is a check for the total fees due in the amount of ____.
☒ The Commissioner is authorized to charge any additional fees and to credit any overpayment of fees which may be required under 37 C.F.R. §1.16 or §1.17, to Deposit Account No 04-1679, referencing Atty. Docket No. R0367-01002.
 A duplicate copy of this document is enclosed.

By: 

Edward J. Lynch
 Registration No. 24,422

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PATENT

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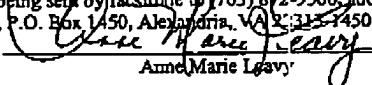
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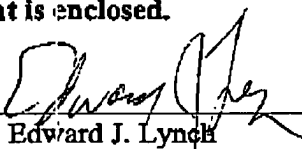
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AMENDMENT AND RESPONSE TO
OFFICE ACTION MAILED
08/20/2004

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I hereby certify that this correspondence is being transmitted by first class mail to Examiner John A. Jeffrey (703) 872-9306,
Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on 11/18/04, in San Francisco, CA.
By [Signature]

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action mailed August 20, 2004, please amend the above-referenced application as follows: